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JUL 27 2005

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/608,184
	Filing Date	June 30, 2000
	First Named Inventor	Samuel N. Zellner
	Art Unit	2134
	Examiner Name	Christopher J. Brown
	Attorney Docket Number	BS99224

Total Number of Pages in This Submission: 8

ENCLOSURES

(Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): ① Credit Card Payment Form ② 3 MONTH EXT OF TIME REQUEST, RESOLVE CLAIM, NOTICE
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Name (Print/Type)	Bambi Faivre Walters	Reg. No.:	45,197
Signature	<i>Bambi Walters</i>		
Date	July 27, 2005		

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Name (Print/Type)	Bambi Faivre Walters	Date	July 27, 2005
Signature	<i>Bambi Walters</i>		

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JUL 27 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Samuel N. Zellner

Group Art Unit: 2134

Application No.: 09/608,184

Examiner: Christopher J. Brown

Filed: June 30, 2000

Title: "System and Method for Monitoring Commercial Transactions"

VIA FACSIMILE 571-273-8300

TC2100 AFTER FINAL

Attn: Examiner Christopher J. Brown

37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on: JULY 27, 2005 (date of transmission).

Bambi F. Walters

Name of Person Faxing This Paper

B. F. Walters

Signature

JULY 27, 2005

Date of Transmission

NOTICE OF APPEAL OF FINAL OFFICE ACTION MAILED ON JANUARY 27, 2005
AND REQUEST FOR THREE MONTH EXTENSION OF TIME

This Notice of Appeal is filed in reply to the Final Office Action mailed on January 27, 2005 and in reply to the Advisory Action mailed on July 15, 1005. Assignee respectfully attaches form PTO/SB/31 for the Notice of Appeal. Further, Assignee includes the currently pending claims for appeal:

07/28/2005 MBINAS 00000023 09600104

01 FC:1253

02 FC:1401

1020.00 OP

500.00 OP

U.S. Application No. 09/608,184 Examiner Christopher J. Brown Art Unit 2134
Notice of Appeal to the January 27, 2005 Final Office Action and Request for Extension of Time

CURRENTLY PENDING CLAIMS FOR APPEAL

[c01]-[c40] (canceled)

[c41] (previously presented) A method for monitoring a commercial transaction for a payer, comprising the steps of:

initiating the commercial transaction;

sending an authorization request to a processing center, wherein the authorization request comprises an amount of the commercial transaction;

receiving the authorization request, including an identification of the payer, in a computer in a processing center;

determining whether the payer is a subscriber of the commercial transaction monitoring service;

continuing processing of the commercial transaction if the payer is not a subscriber to the commercial transaction monitoring service; and

if the payer is a subscriber to the commercial transaction monitoring service:

obtaining a notification address corresponding to the identification of the payer;

creating a notification message using the notification address, wherein the notification message comprises a help communications address for assistance with the commercial transaction and wherein the notification message further comprises at least one of a merchant name, a merchant address, the amount of the commercial transaction, a date of the commercial transaction, a time of the commercial transaction, a name of the payer, and a reference number of the commercial transaction;

sending the notification message to the notification address if the payer is a subscriber to the commercial monitoring service;

receiving a request to connect the payer with the help communications address for assistance with the financial transaction; and

initiating a communications connection among the payer and the help communications address.

[c42]-[c55] (canceled)

U.S. Application No. 09/608,184 Examiner Christopher J. Brown Art Unit 2134
Notice of Appeal to the January 27, 2005 Final Office Action and Request for Extension of Time

**AUTHORIZATION FOR PAYMENT OF FEES &
REQUEST FOR AN EXTENSION OF TIME**

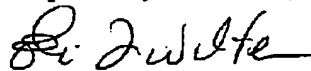
Assignee respectfully requests an additional three month extension of time to the Final Office Action mailed on January 27, 2005. Assignee submits payment for a three month extension of time to respond to the January 27, 2005 Office Action from April 27, 2005 to the three month extension of July 27, 2005. In addition, Assignee submits the Notice of Appeal Fee of \$500.00.

Description of Fee	Amount
Three Month Extension of Time Fee	\$1,020.00
Notice of Appeal Fee	\$500.00
Total	\$1,520.00

The Assignee, therefore, includes a Credit Card Payment Form PTO-2038 for \$1,520.00. If there are any other fees due in connection with the filing of this response, please charge the fees to the credit card on file. If a fee is required for an extension of time under 37 C.F.R. 1.136 not accounted for above, such an extension is requested and the fee should also be charged to the credit card on file.

If the Office has any questions, the Office is invited to contact the undersigned at (757) 253-5729 or bambi@wzpatents.com.

Respectfully submitted,



Bambi F. Walters, Reg. No. 45,197
Attorney for Assignee
PO Box 5743
Williamsburg, VA 23188
Telephone: 757-253-5729

Date: JULY 27, 2005

JUL 27 2005

PTO/SB/31 (04-05)

Approved for use through 07/31/2006. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**NOTICE OF APPEAL FROM THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)

BS99224

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] July 27, 2005
on _____

Signature

Typed or printed name **Bambi F. Walters**In re Application of **System and Method for
Monitoring Commercial Transactions**

Application Number

09/608,184

Filed

06/30/2000

For **Samuel N. Zellner**

Art Unit

2785

Examiner

Christopher J. Brown

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))

\$500.00

- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____
- ☐ A check in the amount of the fee is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.
- ☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. _____. I have enclosed a duplicate copy of this sheet.
- ☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

- ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- ☒ attorney or agent of record. Registration number 45,197
- ☐ attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____

Signature

Bambi F. Walters

Typed or printed name

757-253-5729

Telephone number

July 27, 2005

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 8 forms are submitted.

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

JUL 27 2005

**FEE TRANSMITTAL
for FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

Application Number	09/608,184
Filing Date	06/30/2000
First Named Inventor	Samuel Zellner
Examiner Name	Christopher J. Brown
Art Unit	2785
Attorney Docket No.	BS99224

TOTAL AMOUNT OF PAYMENT **\$1,520.00****METHOD OF PAYMENT (check all that apply)**

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other
☐ Deposit Account Deposit Account No. 19-2167

Deposit Account Name:

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES			SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)		
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (Including Reissues)	50	25
Each independent claim over 3 (Including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims		
_____ - 20 or HP = 0	0	0
_____ x 0 = 0	0	0
_____ = 0	0	0
Multiple Dependent Claims		
_____ Fee (\$)	0	0
_____ Fee Paid (\$)	0	0

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____ - 3 or HP = 0	0	0	0
_____ x 0 = 0	0	0	0
_____ = 0	0	0	0

HP=highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Fee (\$)	Fee Paid (\$)
_____ - 100 = 0	0	0	0
_____ / 50	0 (round up)	0	0
_____ x	0	0	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

Notice of Appeal and Three (3) Month Extension of Time Fee

\$1,520.00

SUBMITTED BY:**Complete (if applicable)**

Name (Print/Type)	Bambi F. Walters	Registration No. (Attorney/Agent)	45,197	Telephone:	(757) 253-5729
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Signature	<i>Bambi F. Walters</i>	Date	7/27/2005
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FEE TRANSMITTAL

for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

Application Number 09/608,184
Filing Date 06/30/2000
First Named Inventor Samuel Zellner
Examiner Name Christopher J. Brown
Art Unit 2785
Attorney Docket No. BS99224

TOTAL AMOUNT OF PAYMENT

\$1,520.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other
☐ Deposit Account Deposit Account No. 19-2167

Deposit Account Name:

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☐ Charge fee(s) indicated below, except for the filing fee
☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Fee (\$)	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
		Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)		
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP = 0	x 0	= 0				

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP = 0	x 0	= 0	

HP=highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Fee (\$)	Fee Paid (\$)
- 100 = 0	/ 50	0 (round up) x	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Notice of Appeal and Three (3) Month Extension of Time Fee

\$1,520.00

SUBMITTED BY:

Complete (if applicable)

Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone:
Bambi F. Walters	45,197	(757) 253-5729
Signature	Date	
<i>Bambi F. Walters</i>	7/27/2005	